

Express Mail No.: EV 456 933 627 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Chappey *et al.*

Confirmation No.: 4793

Application No.: 10/612,603

Group Art Unit: 1645

Filed: July 1, 2003

Examiner: To be assigned

For: COMPOSITIONS AND METHODS
FOR DETERMINING THE
SUSCEPTIBILITY OF A
PATHOGENIC VIRUS TO
PROTEASE INHIBITORS

Attorney Docket No.: 11068-065-999

TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicants submit herewith a Revocation and Power of Attorney executed by Kathy Hibbs on behalf of ViroLogic, Inc., the Assignee of the entire interest in the above-identified patent.

Applicants request that the Revocation and Power of Attorney be made of record in the file for the above-identified patent.

It is estimated that no fee is due in connection with this transmittal. In the event that a fee is required, please charge the required fee to Jones Day Deposit Account No. 50-3013.

Respectfully submitted,

Date: January 20, 2005

David C. Pauling

56,056

(Reg. No.)

For: Nikolaos C. George (Reg. No. 39,201)

JONES DAY

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New York, New York 10017-6702

(212) 326-3939

Enclosure



Express Mail No. EV 456 932 627 US

POWER OF ATTORNEY

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Chappey et al.

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Serial No.: 10/612,603

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PROTEASE INHIBITORS

Attorney Docket No.: 11068-065-999

REVOCATION AND POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

ViroLogic, Inc., Assignee, hereby revokes any and all previous powers and appoints:

☒ Practitioners at Customer Number 20583

as its attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please direct all correspondence address for the above-identified application to:

☒ The above mentioned Customer Number.

☒ Firm or Individual Name:

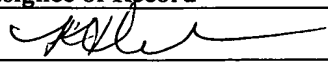
Address: Jones Day, 222 East 41st Street, New York, New York 10017

Telephone: (212) 326-3939

I am the:

☐
☒

Applicant/Inventor
Assignee of record of the entire interest. See 37 CFR 3.71.
(Statement under 37 CFR 3.73(b) is applicable)

SIGNATURE of Applicant or Assignee of Record			
Date:	6/16/04	Signature:	
		Typed Name:	Kathy Hibbs
		Position/Title:	Vice President and General Counsel

Statement Under 37 C.F.R. 3.73(b)

Virologic, Inc., states that it is:

- ☒ the assignee of the entire right, title, and interest; or
☐ an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is %

in the patent application/patent identified above by virtue of either:

- ☒ An assignment from the inventor(s) of the patent application/patent identified above, a copy which is attached hereto.

OR

- ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: To:
The document was recorded in the United States Patent and Trademark Office on at
Reel , Frame , or for which a copy thereof is attached.

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at Reel , Frame , or for which a copy thereof is attached.

3. From: To:
The document was recorded in the United States Patent and Trademark Office on
at Reel , Frame , or for which a copy thereof is attached.

- ☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.
[Note: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

ASSIGNEE:

ViroLogic, Inc.

Date:

6/6/04

Signature:



Typed Name:

Kathy Hibbs

Position/Title:

Vice President and General Counsel

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.

- ☒ Total of 1 form is submitted.